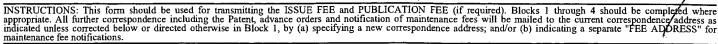
## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

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05/06/2004

G.E. EHRLICH (1995) LTD. c/o ANTHONY CASTORINA **SUITE 207** 2001 JEFFERSON DAVIS HIGHWAY ARLINGTON, VA 22202



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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

(Depositor's name) (Signature) (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/987,688	11/15/2001	Abraham Z. Reznick	01/22308	7185

TITLE OF INVENTION: FILTERS FOR PREVENTING OR REDUCING TOBACCO SMOKE-ASSOCIATED INJURY IN THE AERODIGESTIVE TRACT OF A SUBJECT

APPLN. TYPE	SMALL ENTITY	ISSUE FI	EE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$665		\$300	\$965	08/06/2004
EXAMINER		ART UNIT		CLASS-SUBCLASS		
WALLS, DIONNE A		1731		131-334000	_	
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Lack Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  Lack Change of Correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  Lack Change of Correspondence address (or Change of Correspondence Address form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			names of agents OI firm (have agent) and	nting on the patent front page up to 3 registered patent a R, alternatively, (2) the name ing as a member a registered d the names of up to 2 regis or agents. If no name is liste inted.	attorneys or 1 5 5 6 6 6 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Ebrlich (
been previously submitte (A) NAME OF ASSIGN	ed to the USPTO or is being IEE  Research	submitted under sep (B L Deve	parate cover. RESIDENO	ar on the patent. Inclusion of a Completion of this form is NO CE: (CITY and STATE OR CO	T a substitute for filing an assi DUNTRY)  H  H  H	tte when an assignment hi gnment. laifa, Isra
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Authorized Signature)	1/ 4	(Date)
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other than the applic	ant: a registered attorne	if required) will not be accepted from anyon y or agent; or the assignee or other party in States Patent and Trademark Office.

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08/05/2004 JADDO2 00000139 501407 09987688 81 FC: 1584

## UNITED STATES PATENT AND TRADEMARK OFFICE

In re Applicant:

REZNICK Abraham Z. et al

Serial No.:

09/987,688

Filed:

15-Nov-2001

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Group Art Unit: 1731

Docket: 01/22308

Attorney

For:

FILTERS FOR PREVENTING OR

REDUCING TOBACCO SMOKE...

Walls, Dionne A.

Examiner:

Commissioner for Patents PO Box 1450

Alexandria, VA 22313-1450

## TRANSMITTAL OF ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

In response to the Notice of Allowance dated 6 May 2004 we enclose the following:

Issue fee transmittal form requesting that the issue fee of (\$ 665) and publication fee of (\$ 300) be charged to our deposit account 50-1407.

Any additional charge or credit may be made to our deposit account 50-1407. A duplicate copy of this letter is enclosed for this purpose.

Respectfully submitted,

Sol Sheinbein

Registration No. 25,457

Ramat Gan, Israel Date: 1 August 2004